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(Address)
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(City/State/Zip/Phone #)
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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088

Date:	09/16/2020		
	Jennifer Bialowas		
	#: 1256940		
		POSSIP INC.	
	les of Incorporation/Authoriza	ation to Transact Business	
_	ndment		
☐ Char	nge of Agent		
Rein	statement		7 <u>.</u>
☐ Conv	version		2678 ć
☐ Merg	ger		^ ! 7
Disso	olution/Withdrawal		
☐ Fictit	ious Name		5. 5.
Othe	ſ		
Authorized /			

F: 800.944.6607

COVER LETTER

TO: Registration Division of O					
SUBJECT:	F	POSS	SIP, INC.		
SUBJECT:	Name	e of corporation - m			
Dear Sir or Madam:					
	nce," or "Certifica	ite of Good Standin	thorization to Transact E g" and check are submit n Florida.		
Please return all corr	espondence concer	ming this matter to	the following:		
		Sandra Omoro	gieva		
		Name of Per	son		
	С	OGENCY GLOE	BAL INC.		
		Firm/Compar	iy .		
	111 WEST W	ASHINGTON S	TREET SUITE 1447		
		Address			
		CHICAGO, IL 6	80602		
		City/State and	Zip code		<u></u>
		op@cogencyglo			<u> </u>
-	E-mail addre	ess: (to be used for	future annual report noti	fication)	2020 d. ~ 1.7
For further informati	on concerning this	matter, please call			-1
					- :
Shani I		_ at (<u>615</u>)	712-3270		
Name of Per	son	Area Code	Daytime Telephor	e Number	S ST
Registration Division of C Clifton Build	Corporations ling ive Center Circle	ess:	MAILING ADD Registration Sect Division of Corpo P.O. Box 6327 Tallahassee, FL	ion orations	
Enclosed is a check f	\$78.75 Fil	ing Fee & 🛄 \$	<u> </u>	\$87.50 Filing Fe	
2661 Execut Tallahassec, Enclosed is a check f	ive Center Circle FL 32301 For the following at the foll	ing Fee & 🛄 \$	Tallahassee, FL	∃ \$87.50 Filing F	3

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503. FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

I. POSSIP, INC.			lu.	
		rporation; must include "INCORPORATED." "Crp." "Inc." "Co." or "Corp.")	OMPANY," "CORPORATION,"	
	(If name unavailab	ble in Florida, enter alternate corporate name ado	nted for the number of transacting business i	in Florida)
	(1) hance unavariat	•	ned to the purpose of transfering outsiness.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
2.		Delaware 3	(PITt ie l'anti-	
	(State or country)		(Firi number, ii applicable)	
4.		10/22/2018 5.	(Date of duration, if other than perpet	
	(Date	of incorporation)	(Date of duration, if other than perpet	ual)
6.		Upon filing].	
		(Date first transacted business in Flo (SEE SECTIONS 607.1501 & 607.1502.		
7		1405 Forrest Ave, Nash	ville, TN 37206	
(Principal office address)			ffice address)	
		(Current mailing a	ddress, if different)	
S.	Name and street	t address of Florida registered agent: (P.O. B		3 9762
				;
	Name:	COGENCY GLOBAL INC.	_	7
0	ffice Address:	115 North Calhoun Street, Suite 4	_	
		Tallahassee	. Florida 32301	≅
		(City)	(Zip code)	<i>ာ</i> မာ

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman:	Shani Dowell	
Address:	1405 Forrest Ave. Nashville, TN 37206	
Vice Chairman:	Shani Dowell	
Address:	1405 Forrest Ave, Nashville, TN 37206	
Director:	Shani Dowell	
Address:	1405 Forrest Ave, Nashville, TN 37206	
Director:		
Address:		
B. OFFICERS		
President:	Shani Dowell	
Address:	1405 Forrest Ave, Nashville, TN 37206	
Vice President:	Shani Dowell	207(1
Address:	1405 Forrest Ave, Nashville, TN 37206	[3]
Secretary:	Shani Dowell	
Address:	1405 Forrest Ave, Nashville, TN 37206	9
Treasurer:	Shani Dowell	<u></u>
Address:	1405 Forrest Ave, Nashville, TN 37206	
NOTE: If necessar	ary, you may attach an addendum to the application listing additional officers and	or directors.
12	Shani Jackson Dowell Signature of Director or Officer	
are true and that h	Signature of Director or Officer ector signing this document (and who is listed in number 11 above) affirms that the e or she is aware that false information submitted in a document to the Department on a sprovided for in s.817.155, F.S.	
13	Shani Jackson Dowell	
	(Typed or printed name and capacity of person signing application)	



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "POSSIP, INC." IS DULY INCORPORATED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE TENTH DAY OF SEPTEMBER, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "POSSIP, INC."

WAS INCORPORATED ON THE TWENTY-SECOND DAY OF OCTOBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

2020 S. . 1 1 P. . 10. 17.0

Authentication: 203632180

Date: 09-10-20